

DECLARATION AND POWER OF ATTORNEY
Utility Application

As below named inventor(s), I (We) hereby declare that:

My (Our) residence, post office address and citizenship are as stated below next to my (our) name(s).

I (We) believe I (we) am (are) the original, first and sole inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD AND APPARATUS FOR CONVERSION OF A STANDARD SHOWERHEAD TO A SPRAY BAR

the specification of which

(Check One) ☒ is attached hereto OR
☐ was filed on _____ as United States Application Serial No. _____

I (We) hereby state that I (we) have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I (We) acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I (We) hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	<u>Priority Claimed</u>	
			Yes	No

I (We) hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date
60/511,184	10/14/2003

I (We) hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned

POWER OF ATTORNEY: As a named inventor(s), I (we) hereby appoint as my (our) attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified invention application, Eleanor M. Musick, Reg. No. 35,623; Kamwah W. Li, Reg. No. 34,211; Stephen C. Beuerle, Reg. No. 38,380; Patric J. Rawlins, Reg. 47,887; Kathleen A. Pasulka, Reg. No. 35,652; Kenneth H. Tarbet, Reg. No. 43,181; Richard Campbell, Reg. No. 34,790; and Gary Eastman, Reg. No. 41,005.

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Please send all correspondence to the attention of Eleanor M. Musick, and direct all telephone calls to (760) 931-9700.

I (We) further declare that all statements made herein of my (our) own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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INVENTOR'S SIGNATURE _____ DATE _____					

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